



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 1520

SERIAL NUMBER 10/693,042	FILING OR 371(c) DATE 10/24/2003 RULE	CLASS 424	GROUP ART UNIT 1647	ATTORNEY DOCKET NO.
APPLICANTS Nurit Kalderon, New York, NY; <i>OK, SLW</i>				
** CONTINUING DATA ***** This appln claims benefit of 60/421,103 10/24/2002 <i>OK, SLW</i>				
** FOREIGN APPLICATIONS ***** <i>None</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/23/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Dr. Nurit Kalderon</i> Acknowledged <i>Dr. Nurit Kalderon</i> Examiner's Signature Initials		STATE OR COUNTRY NY	SHEETS DRAWING 5	TOTAL CLAIMS 28
INDEPENDENT CLAIMS 4				
ADDRESS Dr. NURIT KALDERON APT. 6J 30 RIVER ROAD NEW YORK, NY10044				
TITLE Beta interferon for the treatment of chronic spinal cord injury				
FILING FEE RECEIVED 861	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	